

<b>United States Bankruptcy Court Southern District of New York</b>		<b>VOLUNTARY PETITION</b>	
IN RE (Name of debtor-If individual, enter Last, First, Middle <b>Tiramisu Restaurant, LLC</b>		NAME OF JOINT DEBTOR (Spouse) (Last, First, Middle)	
ALL OTHER NAMES used by the debtor in the last 6 years (include married, maiden and trade names)  <b>None</b>		ALL OTHER NAMES used by the joint debtor in the last 6 years (Include married, maiden and trade names)	
SOC. SEC./TAX I.D. NO. (If more than one, state all) <b>3260</b>		SOC. SEC./TAX I.D. NO. (If more than one, state all)	
STREET ADDRESS OF DEBTOR (No. and street, city, state, zip) <b>1410 Third Avenue New York, NY 10021</b>		STREET ADDRESS OF DEBTOR (No. and street, city, state, zip)	
COUNTY OF RESIDENCE OR PRINCIPAL PLACE OF BUSINESS <b>New York</b>		COUNTY OF RESIDENCE OR PRINCIPAL PLACE OF BUSINESS	
MAILING ADDRESS OF THE DEBTOR (If different from street address)		MAILING ADDRESS OF JOINT DEBTOR (If different from street address)	
LOCATION OF PRINCIPAL ASSETS OF BUSINESS DEBTOR (If different from addresses listed above)		Debtor has been domiciled or has had a residence, principal place [X] of business or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general [ ] partner or partnership pending in this District.	

**INFORMATION REGARDING THE DEBTOR (Check applicable boxes)**

<b>TYPE OF DEBTOR</b> <input type="checkbox"/> Individual <input type="checkbox"/> Corporation Publicly Held <input type="checkbox"/> Joint (H&W) <input checked="" type="checkbox"/> Corporation Not Publicly Held <input type="checkbox"/> Partnership <input type="checkbox"/> Municipality <input type="checkbox"/> Other _____ <b>NATURE OF DEBT</b> <input type="checkbox"/> Non-Business Consumer <input checked="" type="checkbox"/> Business - Complete A & B below <b>A. TYPE OF BUSINESS (Check one box)</b> <input type="checkbox"/> Farming <input type="checkbox"/> Transportation <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Professional <input type="checkbox"/> Manufacturing/ <input type="checkbox"/> Construction Mining <input type="checkbox"/> Retail/Wholesale <input type="checkbox"/> Stockbroker <input checked="" type="checkbox"/> Other Business <b>B. BRIEFLY DESCRIBE NATURE OF BUSINESS</b> <b>Restaurant</b>	<b>CHAPTER OR SECTION OF BANKRUPTCY CODE UNDER WHICH THE PETITION IS FILED (Check one box)</b> <input type="checkbox"/> Chapter 7 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> § 304-Case Ancillary to Foreign <b>FILING FEE (Check one box)</b> Proceeding <input checked="" type="checkbox"/> Filing fee attached <input type="checkbox"/> Filing fee to be paid in installments. (Applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). <b>NAME AND ADDRESS OF LAW FIRM OR ATTORNEY</b> <b>Kornfeld &amp; Associates, P.C.</b> <b>240 Madison Avenue, 8<sup>th</sup> Floor</b> <b>New York, NY 10016</b> <b>(212) 759-6767</b> <b>NAME(S) OF ATTORNEY(S) DESIGNATED TO REPRESENT THE DEBTOR</b> <b>Randy M. Kornfeld, Esq.</b>
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**STATISTICAL ADMINISTRATIVE INFORMATION (28 U.S.C. § 604)  
(Estimates only) (Check applicable boxes)**

<input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.
<b>ESTIMATED NUMBER OF CREDITORS</b> <input checked="" type="checkbox"/> 1-15 <input type="checkbox"/> 16-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1000-over
<b>ESTIMATED ASSETS (in thousands of dollars)</b> <input type="checkbox"/> Under 50 <input checked="" type="checkbox"/> 50-99 <input type="checkbox"/> 100-499 <input type="checkbox"/> 500-999 <input type="checkbox"/> 1000-9999 <input type="checkbox"/> 10,000-99,000 <input type="checkbox"/> over 100,000
<b>ESTIMATED LIABILITIES (in thousands of dollars)</b> <input type="checkbox"/> Under 50 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-499 <input checked="" type="checkbox"/> 500-999 <input type="checkbox"/> 1000-9999 <input type="checkbox"/> 10,000-99,000 <input type="checkbox"/> over 100,000
<b>ESTIMATED NUMBER OF EMPLOYEES - CH 11 &amp; 12 ONLY</b> <input type="checkbox"/> 0 <input checked="" type="checkbox"/> 1-19 <input type="checkbox"/> 20-99 <input type="checkbox"/> 100-999 <input type="checkbox"/> 1000-over
<b>ESTIMATED NO. OF EQUITY SECURITY HOLDERS - CH 11 &amp; 12 ONLY</b> <input type="checkbox"/> 0 <input checked="" type="checkbox"/> 1-19 <input type="checkbox"/> 20-99 <input type="checkbox"/> 100-999 <input type="checkbox"/> 1000-over